

Licensee Information will be in the top portion of this form.

I. INSPECTION INFORMATION:

DATE OF LAST INSPECTION:

- 1. ☐ ABC LICENSE POSTED
- 2. ☐ DESIGNATED MANAGER POSTED
- 3. ☐ OTHER LOCAL/STATE/FEDERAL LICENSES POSTED
- 4. ☐ OWNERSHIP CORRECT
- 5. ☐ ADDRESS CORRECT
- 6. ☐ TRADE NAME CORRECT
- 7. ☐ NO MODIFICATIONS TO FACILITY

- 8. ☐ SALES/PURCHASE RECORDS AVAILABLE & INSPECTED
- 9. ☐ AB INVOICES/KEG REG. BOOKS AVAILABLE & INSPECTED
- 10. ☐ MIXED BEVERAGE STAMPS INSPECTED
- 11. ☐ _____ # OF TAXABLE MB SEATS
- 12. ☐ EQUIPMENT SUFFICIENT
- 13. ☐ INVENTORY SUFFICIENT
- 14. ☐ FOOD AVAILABILITY DURING ALL HOURS

II. LICENSEE COMMENTS/SUGGESTIONS: _____

III. AGENT COMMENTS: _____

IV. LICENSEE/DESIGNEE: _____ **TITLE:** _____

DATE OF INSPECTION: _____ **TIME:** _____

SPECIAL AGENT'S SIGNATURE: _____